

MARTIN & FERRARO, LLP
ATTORNEYS AT LAW1925 CENTURY PARK EAST, 17TH FLOOR
LOS ANGELES, CALIFORNIA 90067
310.286.9800
FACSIMILE: 310.286.2795WASHINGTON D.C. METRO OFFICE
Telephone: 703.679.9300
Facsimile: 703.679.9303

WALTER'S EMAIL:

jlindenlaub@martinferraro.com

February 15, 2006

Director of the U.S. Patent and Trademark Office
Attn. Refunds
2051 Jamieson Avenue, Suite 300
Alexandria, VA 22314Via Facsimile
571-273-6500Re: Deposit Account No. 50-1068

Dear Sir/Madam:

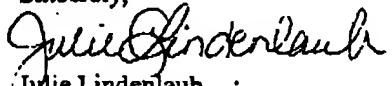
We're in receipt of the Monthly Statement of Deposit Account (copy attached) dated December 30, 2005 and we noticed an error in connection with serial no. 09/605,001 (attorney docket no. 101.0044-04000) that was posted on December 21, 2005. Please see details below:

- 1) On December 29, 2003 we filed an Amendment (copy also attached) that included 3 additional claims and 1 additional independent claim. The total amount that should have been charged to the deposit account was \$140.00; that is, \$54.00 for 3 additional claims and \$86.00 for 1 additional independent claim. These fees were never deducted from the Deposit Account;
- 2) Now, 2 years later, the current rate for additional claims for a total of \$350.00 has been deducted from the Deposit Account for these fees and that is incorrect. Since the Amendment was filed in 2003, the fee rates in place at that time (\$140.00) should have been charged; and
- 3) Finally, the fees have been charged to the wrong Deposit Account. \$140.00 should be charged to Deposit Account No. 50-1066 (our client, Karlin Technology, Inc.).

In light of the above, please credit Deposit Account No. 50-1068 the total amount of \$350.00 and charge Deposit Account 50-1066 the 2003 fee of \$140.00 as soon as possible.

Thank you for your assistance in resolving this matter. Please call me if you have any questions or if you need additional information.

Sincerely,


Julie Lindenlaub
Administrator

jcl

BEST AVAILABLE COPY



United States
Patent and
Trademark Office

Return To:
USPTO
Home
Page
Finance
Online
Shopping
Page

Deposit Account Statement

Requested Statement Month: December 2006
Deposit Account Number: 501068
Name: MARTIN & FERRARO
Attention: THOMAS H MARTIN
Address: 1557 LAKE O PINES ST NE
City: HARTVILLE
State: OH
Zip: 44632-8711
Country: UNITED STATES OF AMERICA

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
12/05	43	10868109	101.0105-01000	1253	\$1,020.00	\$6,747.00
12/05	44	10868109	101.0105-01000	1814	\$130.00	\$6,817.00
12/05	351	11291038	101.0101-01000	1011	\$300.00	\$6,317.00
12/05	352	11291038	101.0101-01000	1111	\$500.00	\$5,817.00
12/05	353	11291038	101.0101-01000	1311	\$200.00	\$5,617.00
12/05	354	11291038	101.0101-01000	1202	\$1,350.00	\$4,267.00
12/05	355	11291039	101.0099-02000	1011	\$300.00	\$3,967.00
12/05	356	11291039	101.0099-02000	1111	\$500.00	\$3,467.00
12/05	357	11291039	101.0099-02000	1311	\$200.00	\$3,267.00
12/05	358	11291039	101.0099-02000	1202	\$600.00	\$2,667.00
12/08	9	10310522	101.0063-010	1801	\$780.00	\$1,877.00
12/08	10	10310522	101.0063-010	1251	\$120.00	\$1,757.00
12/08	208	10112745	101.0079-000	1501	\$1,400.00	\$357.00
12/08	209	10112745	101.0079-000	1504	\$300.00	\$57.00
12/20	5	09605695	108.0003-000	1253	\$1,020.00	-\$963.00
12/20	28	10292539	102.0002-130	1253	-\$1,020.00	\$57.00
12/20	29	10292539	102.0002-130	1401	-\$500.00	\$557.00
* 12/21	3	09605001	101.0044-040	1201	\$200.00	\$687.00 → \$86.00
12/21	4	09605001	101.0044-040	1202	\$150.00	\$207.00 → \$54.00
12/21	143	10292539	102.0002-130	1202	\$200.00	\$7.00
12/29	3	10322624		1801	\$790.00	-\$783.00
12/29	38	E-REPLENISHMENT		9203	-\$25,000.00	\$24,217.00
START		SUM OF		SUM OF		END
BALANCE		CHARGES		REPLENISH		BALANCE
\$7,767.00		\$10,070.00		\$26,520.00		\$24,217.00

Should be:
Total: \$140

BEST AVAILABLE COPY

02-15-06 08:02pm From: MARTIN & FERRARO LLP CA
02-15-2006 16:28 From: MARTIN&FERRAROLLP

3102862795
3308772030

T-848 P.04/04 F-265
T-811 P.001/001 P-887

FORM PTO-1083

Attorney Docket No.: 101.0044-04000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Gary Karlin Michelson
Serial No.: 09/605,001
Filed: June 27, 2000
For: APPARATUS AND METHOD OF INSERTING
SPINAL IMPLANTS

Art Unit: 3784
Examiner: M. Brown

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir,

Transmitted herewith is an Amendment in the above-identified application.

- ☐ No additional fee is required.
☐ Applicant hereby requests a ____-month extension of time to respond to the above office action.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	28	25	3	LG=\$18 SM=\$9	\$ 54.00
INDEPENDENT CLAIMS FEE	10	9	1	LG=\$86 SM=\$43	\$ 86.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS				LARGE ENTITY FEE = \$270 SMALL ENTITY FEE = \$135	\$
				TOTAL	\$ 140.00

- *
- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ A fee in the amount of \$140.00 to cover the additional claims fee is to be charged to Deposit Account No. 50-1086.
☐ A fee in the amount of \$____ to cover the three month extension of time is enclosed.
☐ A check in the amount of \$____ to cover the above fees is enclosed.
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1086. A copy of this sheet is enclosed.
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
MARTIN & FERRARO, LLP

By: 

Armando F. Ferraro
Registration No. 37,129

Date: December 29, 2003

1557 Lake O'Pines Street, NE
Hartville, Ohio 44632
Telephone: 330-877-0700
Facsimile: 330-877-2030

BEST AVAILABLE COPY

PATENT
Attorney Docket No. 101.0044-04000
Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED
CENTRAL FAX CENTER

DEC 29 2003

OFFICIAL

In re Application of:)
Gary Karlin Michelson)
Serial No.: 09/605,001)
Filed: June 27, 2000)
For: APPARATUS AND METHOD OF)
INSERTING SPINAL IMPLANTS)

Group Art Unit: 3764
Examiner: M. Brown

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT

Prior to the further examination of the above-identified application, please amend
the application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on
page 2 of this paper.

Remarks begin on page 9 of this paper.

BEST AVAILABLE COPY

Amendment 12-29-03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
 Gary Karlin Michelson
 Serial No.: 09/805,001
 Filed: June 27, 2000
 For: APPARATUS AND METHOD OF INSERTING
 SPINAL IMPLANTS

Art Unit: 3764
 Examiner: M. Brown

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ No additional fee is required.
☐ Applicant hereby requests a ___-month extension of time to respond to the above office action.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	20	-	25	3	LG-\$18 SM-\$9	\$ 54.00
INDEPENDENT CLAIMS FEE	10	-	9	1	LG-\$36 SM-\$18	\$ 88.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$370 SMALL ENTITY FEE = \$135	\$ --
TOTAL						\$ 140.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ A fee in the amount of \$140.00 to cover the additional claims fee is to be charged to Deposit Account No. 50-1066.
☐ A fee in the amount of \$___ to cover the three month extension of time is enclosed.
☐ A check in the amount of \$___ to cover the above fees is enclosed.
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1066. A copy of this sheet is enclosed.
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
 MARTIN & FERRARO, L.P.

By: 

Andres F. Ferraro
 Registration No. 37,129

Date: December 29, 2003

1557 Lake O'Pines Street, NE
 Hartsville, Ohio 44632
 Telephone: 330-877-0700
 Facsimile: 330-877-2030

BEST AVAILABLE COPY

BEST AVAILABLE COPY

RECEIVED
CENTRAL FAX CENTER

FORM PTO-1083

NOV 29 2005

Attorney Docket No.: 101.0044-04000
Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Gary Karlin Michelson
Serial No.: 09/605,001
Filed: June 27, 2000
For: APPARATUS AND METHOD OF
INSERTING SPINAL IMPLANTS

Confirmation No.: 5171

Group Art Unit: 3764
Examiner: Michael Brown

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in reply to the Office Action dated June 14, 2005 in the above-identified application.

- ☐ No additional fee is required.
☒ Applicant hereby requests a three-month extension of time to respond to the above office action.

The fee has been calculated as shown below:

The fee has been calculated as shown below:							
	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	28	-	28	0	LG=\$50 SM=\$25	\$50	\$ 0
INDEPENDENT CLAIMS FEE	10	-	10	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$380 SMALL ENTITY FEE = \$180		\$ 0
TOTAL							\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

-- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

--- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ The total amount of \$1,020.00 to cover the three-month extension of time is to be charged to Deposit Account No. 50-1068.
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1068. A copy of this sheet is enclosed.
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
☒ Any patent application processing fees under 37 C.F.R. § 1.17

11/30/2005 EYALEW1 00000009 501068 09605001

01 FC:1253 1020.00 DA

Respectfully submitted,
MARTIN & FERRARO, LLP

Date: November 29, 2005

By: 
Thomas H. Martin
Registration No. 34,383

1557 Lake O'Pines Street, NE
Hartsville, Ohio 44632
Telephone: 330-877-0700
Facsimile: 330-877-2030

PAGE 2/14 * RCVD AT 11/29/2005 3:45:55 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/29 * DNS:2738300 * CSID:3308772030 * DURATION (mm-ss):03-58

Adjustment date: 03/29/2006 SDIRETA1
12/21/2005 STHOMAS 00000003 501068 09605001
01 FC:1201 200.00 CR
02 FC:1202 150.00 CR

BEST AVAILABLE COPY

MARTIN & FERRARO, LLP
1925 Century Park East - 17th Floor
Los Angeles, California 90067

Telephone
(310) 286-9800

Facsimile
(310) 286-2795

FACSIMILE TRANSMITTAL

TO:

FROM:

Name: Refund Department

Name: Julie Lindenlaub, Administrator

Firm: Commissioner of Patents & Trademarks

Phone No.: 310-286-9800

Fax No.: 571-273-6500

No. of Pages (including this page): 4

Subject: Refund for Deposit Account No. 50-1068

Date: February 15, 2006

Confirmation Copy to Follow: No

Message:

Please see attached.

BEST AVAILABLE COPY

If there is a problem with this transmission please call us at 310-286-9800 or the sender at the number above.

The information contained in this facsimile message is privileged and confidential information intended only for the use of the addressee listed above. If you are not the intended recipient or the employee or agent responsible to deliver this message to the intended recipient, please do not use this transmission in any way, but contact the sender by telephone.